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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/816,544	04/01/2004	Kevin D. Kreutter	3DP-0548	1002
23377 7590 05/08/2008 WOODCOCK WASHBURN LLP CIRA CENTRE, 12TH FLOOR 2929 ARCH STREET PHILADELPHIA, PA 19104-2891				
EXAMINER				
OH, TAYLOR V				
ART UNIT		PAPER NUMBER		
1625				
MAIL DATE		DELIVERY MODE		
05/08/2008		PAPER		

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Office Action Summary

Application No.

10/816,544

Applicant(s)

KREUTTER ET AL.

Examiner

Taylor Victor Oh

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Period for Reply -- The MAILING DATE of this communication appears on the cover sheet with the correspondence address --

A SHORTENED STATUTORY PERIOD FOR REPLY IS SET TO EXPIRE 3 MONTH(S) OR THIRTY (30) DAYS, WHICHEVER IS LONGER, FROM THE MAILING DATE OF THIS COMMUNICATION.

- Extensions of time may be available under the provisions of 37 CFR 1.136(a). In no event, however, may a reply be timely filed after SIX (6) MONTHS from the mailing date of this communication.
- If NO period for reply is specified above, the maximum statutory period will apply and will expire SIX (6) MONTHS from the mailing date of this communication.
- Failure to reply within the set or extended period for reply will, by statute, cause the application to become ABANDONED (35 U.S.C. § 133). Any reply received by the Office later than three months after the mailing date of this communication, even if timely filed, may reduce any earned patent term adjustment. See 37 CFR 1.704(b).

Status

- 1) ☒ Responsive to communication(s) filed on 25 January 2008.
- 2a) ☐ This action is **FINAL**. 2b) ☒ This action is non-final.
- 3) ☐ Since this application is in condition for allowance except for formal matters, prosecution as to the merits is closed in accordance with the practice under *Ex parte Quayle*, 1935 C.D. 11, 453 O.G. 213.

Disposition of Claims

- 4) ☒ Claim(s) 1-9, 11-35 and 64-71 is/are pending in the application.
- 4a) Of the above claim(s) _____ is/are withdrawn from consideration.
- 5) ☐ Claim(s) _____ is/are allowed.
- 6) ☒ Claim(s) 1-9, 11-35, 64-71 is/are rejected.
- 7) ☐ Claim(s) _____ is/are objected to.
- 8) ☐ Claim(s) _____ are subject to restriction and/or election requirement.

Application Papers

- 9) ☐ The specification is objected to by the Examiner.
- 10) ☐ The drawing(s) filed on _____ is/are: a) ☐ accepted or b) ☐ objected to by the Examiner.
Applicant may not request that any objection to the drawing(s) be held in abeyance. See 37 CFR 1.85(a).
Replacement drawing sheet(s) including the correction is required if the drawing(s) is objected to. See 37 CFR 1.121(d).
- 11) ☐ The oath or declaration is objected to by the Examiner. Note the attached Office Action or form PTO-152.

Priority under 35 U.S.C. § 119

- 12) ☐ Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f).
- a) ☐ All b) ☐ Some * c) ☐ None of:
1. ☐ Certified copies of the priority documents have been received.
 2. ☐ Certified copies of the priority documents have been received in Application No. _____.
 3. ☐ Copies of the certified copies of the priority documents have been received in this National Stage application from the International Bureau (PCT Rule 17.2(a)).

* See the attached detailed Office action for a list of the certified copies not received.

Attachment(s)

- 1) ☒ Notice of References Cited (PTO-892)
- 2) ☐ Notice of Draftsperson's Patent Drawing Review (PTO-948)
- 3) ☐ Information Disclosure Statement(s) (PTO/SI-108)
Paper No(s)/Mail Date _____
- 4) ☐ Interview Summary (PTO-413)
Paper No(s)/Mail Date _____
- 5) ☐ Notice of Informal Patent Application
- 6) ☐ Other: _____

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Applicant's arguments with respect to claims 1-9, 11-35, and 64-71 have been considered but are moot in view of the new ground(s) of rejection.

The Status of Claims:

Claims 1-9, 11-35, and 64-71 are pending.

Claims 1-9, 11-35, and 64-71 are rejected.

DETAILED ACTION

1. Claims 1-9, 11-35, and 64-71 are under consideration in this Office Action.

Priority

2. It is noted that this application claims a benefit of 60/461,421 (04/10/2003).

Drawing

3. None.

The following is a quotation of the first paragraph of 35 U.S.C. 112:

The specification shall contain a written description of the invention, and of the manner and process of making and using it, in such full, clear, concise, and exact terms as to enable any person skilled in the art to which it pertains, or with which it is most nearly connected, to make and use the same and shall set forth the best mode contemplated by the inventor of carrying out his invention.

Claim 33 is rejected under 35 U.S.C. 112, first paragraph, as failing to comply with the enablement requirement. The claim(s) contains subject matter which was not described in the specification in such a way as to enable one skilled in the art to which it pertains, or with which it is most nearly connected, to make and/or use the invention. The claim is directed for the method for inhibiting or treating aberrant proteolysis, thrombosis, ischemic , stroke or restenosis in a mammal in need thereof , comprising administering to said mammal an effective amount of a compound of claim 1. The specification does not enable any person skilled in the art to which it pertains, or with which it is most nearly connected, to use the invention commensurate in scope with these claims.

Restenosis, or recurrent stenosis, is an extremely general term. Stenosis is the narrowing of any canal, orifice, valve, duct, artery, vein, tube (such as trachea), opening, etc. in the body. These can arise from obstructive lesions, deposits of granulations, organ hypertrophy, etc. There is no such thing as being able to treat or inhibit such widely diverse problems which arise from different sources.

Stroke is estimated to cause about 15% of deaths, behind only heart disease and cancer. Even those who survive normally suffer from persistent damage, including motor and speech disturbances and/or convulsions. Despite a tremendous effort to resolve these problems, cerebrovascular therapy as so far been limited to trying to

prevent further damage in areas on the margins of the ischemic focus, thus trying to maintain adequate perfusion in remaining intact areas, and thereby limit progressive infarction. This is generally done surgically. Standard pharmaceutical treatment, such as antiarrhythmics and antithrombotics don't get at the cause of the stroke or the damage caused, but are mostly done to insure adequate cardiac functioning.

Effective acute drug treatment of the stroke itself has so far proved to be beyond the reach of medical science. Major efforts have certainly been pressed in the area of neuroprotective therapeutics. Those studied have included use of Ca antagonists such as Levemopamil and flunarizine, to suppress neuronal calcium influx; NMDA antagonists (both competitive, such as APV and CPP, and non-competitive such as chlorpromazine, ifenprodil and Mg salts) as well as AMPA and kainate antagonists to block post-ischemic receptor-operated calcium channels; attempts to block arachidonic acid cascade or elimination of its metabolic products with agents such as lipogenase inhibitors and thromboxane; use of free oxygen radical scavengers such as superoxide dismutase, alpha-tocopherol, or allopurinol to inhibit the lipid peroxidation that damages cell membranes, which may indirectly help prevent intracellular calcium overload; anti-edema agents such as corticosteroids; use of 5-HT_{1A} receptor agonists to suppress 5-HT concentrations in the hippocampal extracellular space; use of CRF receptor antagonists to inhibit excitotoxic brain damage; use of serotonin 1A agonists such as ipsapirone, or adenosine modulators such as vinpocetine, to stimulate adenosine, which may act as a protective agent by hyperpolarizing the postsynaptic neuron; use of

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platelet aggregation inhibitors such as prostacycline and ticlopidine, and other approaches as well.

Despite this vast outpouring of research, the skill level in this art is sufficiently low relative to the difficulty of the task that obtaining a neuroprotective treatment or inhibition of stroke was, as of the filing date, not yet possible. Hence, accomplishing such a goal involves more than routine experimentation. As evidence for this, there is cited Chalmers (TiPS Vol 17, pages 166-172 April 1996), which states flatly on page 170 that, "At present, there are no effective neuroprotective agents that can clinically ameliorate the effects of stroke in humans." For example, Pentoxifylline has been one of the most intensely studied, with dozens of studies published on its properties. It appears to have a wide variety of effects on leucocytes, erythrocytes, neutrophils, plasma fibrinogen levels. These result in a wide-ranging ability to increase blood flow, resulting in effectiveness in some vascular disorders, especially intermittent claudication. Research with different administration methods, or different subcategories of stroke may well result in the discovery of how to get this drug to work, but the slowness and difficulty of this research shows clearly that this involves undue, not routine experimentation. Applicants' compounds have been subjected to far less study.

Thus, the specification fails to provide sufficient support of the broad use of the compounds of formula I for inhibiting or treating ---stroke or restenosis in a mammal in need thereof.

Genentech Inc. v. Novo Nordisk A/S (CA FC) 42 USPQ2d 1001, states that "a patent is not a hunting license. It is not a reward for search, but compensation for its successful conclusion" and "[p]atent protection is granted in return for an enabling disclosure of an invention, not for vague intimations of general ideas that may or may not be workable".

Therefore, an appropriate correction is required.

Double Patenting

The nonstatutory double patenting rejection is based on a judicially created doctrine grounded in public policy (a policy reflected in the statute) so as to prevent the unjustified or improper timewise extension of the "right to exclude" granted by a patent and to prevent possible harassment by multiple assignees. A nonstatutory obviousness-type double patenting rejection is appropriate where the conflicting claims are not identical, but at least one examined application claim is not patentably distinct from the reference claim(s) because the examined application claim is either anticipated by, or would have been obvious over, the reference claim(s). See, e.g., *In re Berg*, 140 F.3d 1428, 46 USPQ2d 1226 (Fed. Cir. 1998); *In re Goodman*, 11 F.3d 1046, 29 USPQ2d 2010 (Fed. Cir. 1993); *In re Longi*, 759 F.2d 887, 225 USPQ 645 (Fed. Cir. 1985); *In re Van Ornum*, 686 F.2d 937, 214 USPQ 761 (CCPA 1982); *In re Vogel*, 422 F.2d 438, 164 USPQ 619 (CCPA 1970); and *In re Thorington*, 418 F.2d 528, 163 USPQ 644 (CCPA 1969).

A timely filed terminal disclaimer in compliance with 37 CFR 1.321(c) or 1.321(d) may be used to overcome an actual or provisional rejection based on a nonstatutory double patenting ground provided the conflicting application or patent either is shown to be commonly owned with this application, or claims an invention made as a result of activities undertaken within the scope of a joint research agreement.

Effective January 1, 1994, a registered attorney or agent of record may sign a terminal disclaimer. A terminal disclaimer signed by the assignee must fully comply with 37 CFR 3.73(b).

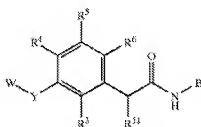
Claims 1-9,11-35, and 64-71 are rejected on the ground of nonstatutory obviousness-type double patenting as being unpatentable over claims 1-11,13-18,27-30 of U.S. Patent No. 6,521,663. Although the conflicting claims are not identical, they are

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not patentably distinct from each other because the relationship between the instant claims and the claims of U.S. Patent No. 6,521,663 is a genus and species.

The claim 1 of the of U.S. Patent No. 6,521,663 is described below:

1. A compound of Formula I:

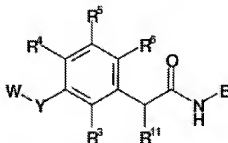


or a solvate, hydrate or pharmaceutically acceptable salt thereof; wherein:

W is hydrogen, R^1 , $R^1OC(O)$, $R^2C(O)$, $R^1(CH_2)_3NHC(O)$, $R^1S(O)_2$, or $(R^1)_2CH(CH_2)_sNHC(O)$, wherein s is 0-4;

,whereas the claim 1 of the instant invention describes below:

1. (*Currently Amended*) A compound of Formula I:



or a solvate, hydrate or pharmaceutically acceptable salt thereof; wherein:

W is R^1 or $R^1S(O)_2$;

However, the instant invention differs from the claim of the U.S. Patent No. 6,521,663 in that the scope of the current invention is narrow that of the U.S. Patent No. 6,521,663.

Even so, the relationship between the instant claims and the claims of U.S. Patent No. 6,521,663 is a genus and species.

Therefore, it would be obvious to the skilled artisan in the art to be motivated to modify the claim of the U.S. Patent No. 6,521,663 in order to get the protection of the narrowed limitation of the claimed compounds; this is not a patentable difference between the instantly claimed invention and the claim of the U.S. Patent No. 6,521,663.

Any inquiry concerning this communication or earlier communications from the examiner should be directed to Taylor Victor Oh whose telephone number is 571-272-0689. The examiner can normally be reached on 8:30-5:00.

If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Janet Andres can be reached on 571-272-0867. The fax phone number for the organization where this application or proceeding is assigned is 571-273-8300.

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Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications may be obtained from either Private PAIR or Public PAIR. Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see <http://pair-direct.uspto.gov>. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free). If you would like assistance from a USPTO Customer Service Representative or access to the automated information system, call 800-786-9199 (IN USA OR CANADA) or 571-272-1000

Taylor Victor Oh, MSD,LAC
Primary Examiner
Art Unit 1625

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Primary Examiner, Art Unit 1625
5/6/08